Summary of You	ur Assets and L	iabilities and	d Certain Statis
Official Form 106	3Sum		
(if known)			
United States Bankruptcy Cour	t for the Middle District  64-00551-1	ct of <u>PH</u> MOF	
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name	
Debtor 1 Larry First Name	Eugene /	Eisenhart Last Name	
Fill in this information to	identify your case:		

Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.		
art 1: Summarize Your Assets		
	Your assets	
	Value of what you own	
Schedule A/B: Property (Official Form 106A/B)	\$	
1a. Copy line 55, Total real estate, from Schedule A/B		
1b. Copy line 62, Total personal property, from Schedule A/B	\$	
1c. Copy line 63, Total of all property on Schedule A/B	····· \$/30,000	
art 2: Summarize Your Liabilities		
	**************************************	
	Your liabilities	
	Amount you owe	
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	\$	
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D		
. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)		
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F		
зь. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	4.0	
	<b>+</b> \$	
Your total liability	ties \$ 26/ 945.	
Tout tout mability	200	
art 3: Summarize Your Income and Expenses		
. Schedule I: Your Income (Official Form 106I)	\$ 00	
Copy your combined monthly income from line 12 of Schedule I		

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Larry Eugene Eisenhart
First Name / Midde Name Last Name

## Part 4: Answe

**Answer These Questions for Administrative and Statistical Records** 

- 6. Are you filing for bankruptcy under Chapters 7, 11, o 13?
  - No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes

- 7. What kind of debt do you have?
  - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
  - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$\_\_00\_\_

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

#### Total claim

From Part 4 on Schedule E/F, copy the following:

- 9a. Domestic support obligations (Copy line 6a.)
- 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)
- 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)
- 9d. Student loans. (Copy line 6f.)
- 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)
- 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)
- 9g. Total. Add lines 9a through 9f.

N/H

s\_N/A

s\_\_*N/A*\_\_

+ s N/A

s N/A

ill in this information to identify your case:		
Debtor 1 Lyrry Eugene Eis	senhart	
First Name Midglie Name Las	st Name	
Spouse, if filing) First Name Middle Name Last	sst Name	
nited States Bankruptcy Court for the: Middle District of	4	
ase number 11/7-bK-00551-MDF		
		k if this is a
	aner	nded filing
Official Form 106Dec		
Declaration About an Indiv	vidual Debtor's Schedules	12/15
f two married people are filing together, both are equally res	esponsible for supplying correct information	
	dules or amended schedules. Making a false statement, concealing proj	
obtaining money or property by fraud in connection with a b	bankruptcy case can result in fines up to \$250,000, or imprisonment for	
years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.		
Sign Below		
Did you pay or agree to pay someone who is NOT an atto	torney to help you fill out bankruptcy forms?	
№ No		
Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and	
	Signature (Official Form 119).	
Under penalty of perjury, I declare that I have read the su	ummary and schedules filed with this declaration and	
Under penalty of perjury, I declare that I have read the su that they are true and correct.	ummary and schedules filed with this declaration and	
	ummary and schedules filed with this declaration and	
	ummary and schedules filed with this declaration and	
	summary and schedules filed with this declaration and	

**Declaration About an individual Debtor's Schedules** 

Date MM / DD / YYYY

Date 3 5 2017

Pebtor 1  Larry Eugene First Name  Debtor 2 (Spouse, if filing)  United States Bankruptcy Court for the: Middle Name  Middle Name  Middle Name  Middle Name  Lift -64-00561-Middle Name	Eisenhart Last Name  Of PA		Check if this is an
			amended filing
Official Form 106A/B			
Schedule A/B: Property	/		12/15
In each category, separately list and describe items category where you think it fits best. Be as complet responsible for supplying correct information. If mo write your name and case number (if known). Answerence and the complete supplying correct information. If mo write your name and case number (if known). Answerence and the complete supplying the complete supplying the case of the complete supplying the case of the complete supplying the case of the cas	te and accurate as possible. If two married people re space is needed, attach a separate sheet to thi	are filing together, bo s form. On the top of a	th are equally
Do you own or have any legal or equitable interes	t in any residence huilding land or similar prope	arty?	
No. Go to Part 2.  Yes. Where is the property?  1.1. 3791 Bear RJ Street address, if available, or other description  Vork PA 17406 City State ZIP Code	What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Do not deduct secured da the amount of any secure Creditors Who Have Claim Current value of the entire property?  \$ 130,000.  Describe the nature of interest (such as fee the entireties, or a life.)	d daims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$
County	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this its property identification number:	Check if this is co (see instructions)	mmunity property
1.2. 98 Sqirre/Lane Street address, if available, or other description	What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	Do not deduct secured clathe amount of any secure Creditors Who Have Clair.  Current value of the entire property?	d claims on Schedule D: ns Secured by Property.
North Bend PA 17760 City State ZIP Code  Clinton County	Timeshare Other CO 6 / N  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by e estate), if known.
	Other information you wish to add about this ite property identification number:	m, such as local	

Schedule A/B: Property

	1.3. Street address, if available, or other description	What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	Do not deduct secured class the amount of any secured Creditors Who Have Claim Current value of the entire property?  \$	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?
	City State ZIP Code	☐ Other Who has an interest in the property? Check one.	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
	County	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number:	Check if this is co (see instructions)	mmunity property
		all of your entries from Part 1, including any entries		<del>336,00</del> 0.
Part	2: Describe Your Vehicles			
you o		est in any vehicles, whether they are registered or a ide, also report it on Schedule G: Executory Contracts and s, motorcycles		3
you o	own that someone else drives. If you lease a vehic	le, also report it on Schedule G: Executory Contracts a		S
you o	own that someone else drives. If you lease a vehice ars, vans, trucks, tractors, sport utility vehicle No	le, also report it on Schedule G: Executory Contracts a		nims or exemptions. Put d claims on <i>Schedule D:</i>
3. C 25	ars, vans, trucks, tractors, sport utility vehicle No Yes  Make: Model: Year: Approximate mileage:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another  Check If this is community property (see	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	nims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
3. C 2 2 3 3 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ars, vans, trucks, tractors, sport utility vehicle  No Yes  Make:  Model:  Year:  Approximate mileage:  Other information:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another  Check If this is community property (see	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	aims or exemptions. Put d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$

coximate mileage:	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)	the amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$  Do not deduct secured clair the amount of any secure Creditors Who Have Clair.  Current value of the entire property?  \$	Current value of the portion you own?  \$aims or exemptions. Put diclaims on Schedule D:
eximate mileage:	Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see	Current value of the entire property?  \$	Current value of the portion you own?  \$
eximate mileage:	At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see	Do not deduct secured clathe amount of any secure Creditors Who Have Clair.  Current value of the	saims or exemptions. Put dictaims on Schedule D: ms Secured by Property.  Current value of the
information:	At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see	Do not deduct secured clathe amount of any secure Creditors Who Have Claim  Current value of the	sims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of the
: l: oximate mileage:	instructions)  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see	the amount of any secure Creditors Who Have Clair Current value of the	aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of the
l:	instructions)  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see	the amount of any secure Creditors Who Have Clair Current value of the	aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of the
l:	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	the amount of any secure Creditors Who Have Clair Current value of the	d claims on Schedule D: ms Secured by Property. Current value of the
oximate mileage:	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see	Creditors Who Have Clair  Current value of the	ms Secured by Property.  Current value of the
oximate mileage:	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see	Current value of the	Current value of the
oximate mileage:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see		
66 - 54	☐ At least one of the debtors and another ☐ Check if this is community property (see	entire property?	portion you own?
information:		\$	\$
		\$	\$
l:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured cla the amount of any secure Creditors Who Have Clain Current value of the entire property?	d claims on Schedule D:
	☐ Check if this is community property (see instructions)	\$	\$
r have more than one, list here:			
A-1997 (A-1997) (A-19	Who has an interest in the property? Check one.	Do not deduct secured cla	nims or exemptions. Put
		Do not deduct secured cla the amount of any secured	d claims on Schedule D:
A-1997 (A-1997) (A-19	Debtor 1 only		d claims on Schedule D:
	Debtor 1 only Debtor 2 only	the amount of any secure	d claims on Schedule D:
	Debtor 1 only	the amount of any secure Creditors Who Have Clain	d claims on Schedule D: ns Secured by Property.
	Boats, trailers, motors, personal v	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Information:  Check if this is community property (see instructions)	Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Current value of the entire property?  Check If this is community property (see instructions)

Larry Eugene Eisenhart
First Name Middle Name Last Name

Case number (16 known) 1:17-64-00551 - MOF

### Part 3: Describe Your Personal and Household Items

Do	you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
6.	Household goods and furnishings	
	Examples: Major appliances, furniture linens, china, kitchenware	
	Examples: Major appliances, furniture, linens, china, kitchenware  No 5079 recliner  Terrigator  Yes. Describe	
	Yes. Describe	\$ 1000.00
	a // 0	*
7.	Electronics	
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
	ONO 2 Televisions	
	X Yes Describe / Computer	\$ 1000,00
	Yes. Describe 1 Computer 1 Printer	\$ 1000,00
	Collectibles of value	
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects;	
	stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	₩ No	
	Yes. Describe	e
		•
9.	Equipment for sports and hobbies	
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes	
	and kayaks; carpentry tools; musical instruments	
	<b>⊠</b> No	
	Yes. Describe	•
		9
10.	Firearms	
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	⊠ No	
	Yes. Describe	•
		Ψ
11.	Clothes	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	□ No	
	Yes. Describe	\$
12.	Jewelry	
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	S No	
	Yes, Describe	e
	Tes. Describe	•
13.	Non-farm animals	
	Examples: Dogs, cats, birds, horses	
	□ No Can I va d	
	No No Yes. Describe	s —
		· ************************************
14.	Any other personal and household items you did not already list, including any health aids you did not list	
vedi.	A STATE OF THE STA	
	□ No □ No Cive coolife	
	Yes. Give specific	\$
	information	
15.	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	\$2000.00
	for Part 3. Write that number here	

Larry Eugene Eisenhart
First Name Midde Name Last Name

Case number (1 known) 1:17-6/-00551 -MOF

### Part 4: Describe Your Financial Assets

Do you own or ha	eve any legal or equitable interest in any of the following	Current value of the portion you own?  Do not deduct secured claims or exemptions.
16. Cash Examples: Mon	ney you ha <b>v</b> e in <b>y</b> our wallet, in your home, in a safe deposi	box, and on hand when you file your petition
No Yes		cash/6.00 \$ 16.00
	oney ecking, savings, or other financial accounts; certificates of o other similar institutions. If you have multiple accounts wit	
□ No		
<b>☑</b> Yes		/ 0
	17.1. Checking account: Mem b	er's 1st Credit Union : .13
	17.2. Checking account:	\$
	17.3. Savings account:	\$
	17.4. Savings account:	
	17.5. Certificates of deposit:	\$
	17.6. Other financial account:	\$
	17.7. Other financial account:	\$
	17.8. Other financial account:	\$
	17.9. Other financial account:	
The second secon	I funds, or publicly traded stocks d funds, investment accounts with brokerage firms, money Institution or issuer name:	market accounts
		\$
19 Non-publicly t	raded stock and interests in incorporated and unincor	orsted businesses including an interest in
	ership, and joint venture	The state of the s
<b>≧</b> KNo	Name of entity:	% of ownership:
Yes. Give s information	about	
		070 % \$
them		0% % \$

No Cive and if		
	lecuar nama:	
Yes. Give specific information about	Issuer name:	
them		
ettrement or pension		01(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans
No	NA, ENISA, NEOGII, 40	orthy, 405(b), think savings accounts, or other pension or profit-sharing plans
Yes. List each		
account separately.	Type of account:	Institution name:
	401(k) or similar plan:	
	Pension plan:	
	IRA:	
	Profession Dr. St.	
	Retirement account:	
	Keogh:	
	Additional account	
	d deposits you have m	nade so that you may continue service or use from a company
our share of all unused	prepayments d deposits you have m	
ur share of all unused amples: Agreements mpanies, or others	prepayments d deposits you have m with landlords, prepai	nade so that you may continue service or use from a company
ur share of all unused amples: Agreements npanies, or others No	prepayments d deposits you have m with landlords, prepai	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications
r share of all unused imples: Agreements panies, or others No	prepayments d deposits you have m with landlords, prepai	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications stitution name or individual:
r share of all unused imples: Agreements ipanies, or others No	prepayments d deposits you have m with landlords, prepai	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications stitution name or individual:
r share of all unused mples: Agreements apanies, or others No	prepayments d deposits you have m with landlords, prepair Ins Electric: Gas: Heating oil:	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications stitution name or individual:
ur share of all unused amples: Agreements npanies, or others No	prepayments d deposits you have m with landlords, prepair Ins Electric: Gas: Heating oil:	nade so that you may continue service or use from a company of rent, public utilities (electric, gas, water), telecommunications stitution name or individual:
ur share of all unused amples: Agreements apanies, or others No	prepayments d deposits you have m with landlords, prepai  Ins Electric:  Gas:  Heating oil:  Security deposit on rer	nade so that you may continue service or use from a company of rent, public utilities (electric, gas, water), telecommunications stitution name or individual:
ur share of all unused amples: Agreements mpanies, or others No	prepayments d deposits you have m with landlords, prepaid  Ins Electric:  Gas:  Heating oil:  Security deposit on rem  Prepaid rent:	nade so that you may continue service or use from a company of rent, public utilities (electric, gas, water), telecommunications stitution name or individual:
our share of all unused camples: Agreements mpanies, or others	prepayments d deposits you have m with landlords, prepair  Ins Electric:  Gas:  Heating oil:  Security deposit on rer  Prepaid rent:  Telephone:	nade so that you may continue service or use from a company of rent, public utilities (electric, gas, water), telecommunications stitution name or individual:
our share of all unused camples: Agreements mpanies, or others	prepayments d deposits you have m with landlords, prepaid  Electric:  Gas:  Heating oil:  Security deposit on rer  Prepaid rent:  Telephone:  Water:	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications stitution name or individual:

2	nterests in an education IRA, 26 U.S.C. §§ 530(b)(1), 529A(b ☑ No		lified ABLE program, or under a qualified state	tuition program.	
	<b>7</b>	Institution name and des	scription. Separately file the records of any interest	s.11 U.S.C. § 521(c)	:
					\$
					C.S.P. C.
•	exercisable for your benefit	erests in property (other	er than anything listed in line 1), and rights or p	owers	
	<b>№</b> No				
Į.	Yes. Give specific information about them				\$
L		and the same of	other Intellectual property from royalties and licensing agreements		
- 57	☑ No ☑ Yes. Give specific				
,	information about them				\$
	Licenses, franchises, and oth Examples: Building permits, exc		tive association holdings, liquor licenses, professi	onal licenses	
Σ	No No				
(	Yes. Give specific information about them				\$
Mor	ney or property owed to you?	,			Current value of the portion you own? Do not deduct secured claims or exemptions.
28. <b>1</b>	ax refunds owed to you				#157605035501
	No No				
	Yes. Give specific information	on		Federal:	<b>.</b>
	about them, including you already filed the re	whether etums			<u></u>
	and the tax years			ocal:	
L		ım alimony, spousal supp	oort, child support, maintenance, divorce settlemen	it, property settlemer	ut
	No D				
(	Yes. Give specific information	on		limony:	•
				aintenance:	\$ \$
				upport	\$
				ivorce settlement:	\$
			P	roperty settlement:	\$
1	Social Security bene		s, disability benefits, sick pay, vacation pay, worke ade to someone else	ers' compensation,	
- 0	No  No Give enecific informati	on			
	Yes. Give specific informati	UI			\$

31.	Interests in Insurance policies  Examples: Health, disability, or life insurance; h	health savings account (HSA); credit, homeow	mer's, or renter's insurance	
	Yes. Name the insurance company of each policy and list its value	mpany name:	Beneficiary:	Surrender or refund value:
	<u></u>			\$
	_	A STATE OF THE STA		\$
		MI		\$
32.	Any interest in property that is due you from if you are the beneficiary of a living trust, experimentally because someone has died.  No  Yes. Give specific information		currently entitled to receive	s
	Claims against third portion whether as not	tures have filled a lesson in a second and a second		
53.	Claims against third parties, whether or not Examples: Accidents, employment disputes, in:		d for payment	
	Yes. Describe each claim			
				\$
34.	Other contingent and unliquidated claims of to set off claims  No	f every nature, including counterclaims of	the debtor and rights	
	Yes. Describe each claim			
				\$
35.	Any financial assets you did not already list	ŧ		
	No No			
	☐ Yes. Give specific information			\$
36.	Add the dollar value of all of your entries fro for Part 4. Write that number here		A TO SEE CO.	:15,13
	rt 5: Describe Any Business-Rela	and Barrenda Var. Com. on Users		
	Describe Any Business-Rei	ated Property You Own or Have a	in interest in. List any re	eal estate in Part 1.
37.	Do you own or have any legal or equitable in	nterest in any business-related property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
				Current value of the portion you own?  Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions you al	Iready earned		
	□ No			
	Yes. Describe			\$
20	Office equipment, furnishings, and supplies	2		T. Company
J.	Examples: Business-related computers, software, mo		nes, desks, chairs, electronic devices	
	□ No			
	☐ Yes. Describe			\$

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade	
☐ No ☐ Yes. Describe	\$
A1. Inventory  No Yes. Describe	\$
42. Interests in partnerships or joint ventures	
□ No	
Yes. Describe Name of entity:  Warner of entity:  Solution:  We of ownership:  Solution:  Sol	\$ \$ \$
3. Customer lists, malling lists, or other compilations  \[ \sum_{\text{No}} \]  No	
Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
Yes. Describe	\$
44. Any business-related property you did not already list  No Yes. Give specific	
information	\$ \$
	\$ \$
	\$ \$
45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here	s
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an interest in if you own or have an interest in farmland, list it in Part 1.	1.
46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  Xi No. Go to Part 7.  Yes. Go to line 47.	
	Current value of the portion you own?  Do not deduct secured claims or exemptions.
47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No	
☐ Yes	\$

- 1	Crops—elther growing or harvested  No Yes. Give specific	
	information	\$
- 1	Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No Yes	
3	<b>—</b> 165	\$
	Farm and fishing supplies, chemicals, and feed	
	☐ Yes	s
	Any farm- and commercial fishing-related property you did not already list	Y
	□ No □ Yes. Give specific information	\$
	Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	s_N/A_
Par	Texas Describe All Property You Own or Have an Interest in That You Did Not List Above	
	Do you have other property of any kind you did not already list?  Examples: Season tickets, country club membership	
	No Change in the contract of t	s
,	Yes. Give specific information	\$
		\$
54. A	Add the dollar value of all of your entries from Part 7. Write that number here	\$
Par	t 8: List the Totals of Each Part of this Form	
55. <b>F</b>	Part 1: Total real estate, line 2	:000.
56. F	Part 2: Total vehicles, line 5	207,000
57. <b>F</b>	Part 3: Total personal and household items, line 15 \$ 2000.00	
58. <b>F</b>	Part 4: Total financial assets, line 36 \$	
59. <b>F</b>	Part 5: Total business-related property, line 45 \$	
60. <b>F</b>	Part 6: Total farm- and fishing-related property, line 52 \$	
61. <b>F</b>	Part 7: Total other property not listed, line 54 +\$	
62.1	Total personal property. Add lines 56 through 61	+\$_2600.00
63.1	Total of all property on Schedule A/B. Add line 55 + line 62	\$ 520,000

Schedule A/B: Property

De De (Sp Uni	btor 1 $\frac{Lgnny}{First Name}$ $\frac{Lugene}{Middle Namb}$ btor 2 $\frac{1}{First Name}$ Middle Namb $\frac{1}{Middle Name}$ Middle Namb $\frac{1}{Middle Name}$ ited States Bankruptcy Court for the $\frac{Middle Name}{Middle Name}$ se number $\frac{1}{Middle Name}$ $$	Last Name Last Name  Last Name  Last Name	nt	☐ Check if this is an amended filing		
Of	ficial Form 106C					
Sc	chedule C: The Pro	operty You	Claim as Exempt	04/16		
Usin spac	is complete and accurate as possible. If two g the property you listed on Schedule A/B: He is needed, fill out and attach to this page a name and case number (if known).	Property (Official Form 106A	VB) as your source, list the property that y	ou claim as exempt. If more		
of ar retir limit wou	For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.  Part 1: Identify the Property You Claim as Exempt					
	Which set of exemptions are you claiming.  You are claiming state and federal nonly.  You are claiming federal exemptions. 1  For any property you list on Schedule A	bankruptcy exemptions. 11 1 U.S.C. § 522(b)(2)	U.S.C. § 522(b)(3)			
	Brief description of the property and line Schedule A/B that lists this property	on Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Check only one box for each exemption.			
	Brief description: Line from Schedule A/B:	_ \$	\$ \$ 100% of fair market value, up to any applicable statutory limit			
	Brief description: Line from Schedule A/B:	_ \$	\$  100% of fair market value, up to any applicable statutory limit			
	Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit			
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and even No No No Yes. Did you acquire the property cove No Yes	ry 3 years after that for case	es filed on or after the date of adjustment.)			

Schedule C: The Property You Claim as Exempt

page 1 of \_\_\_

### Part 2:

#### **Additional Page**

	on of the property and line 4/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:		\$	<b></b>	
Line from Schedule A/B:	- <del> </del>		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b></b>	
Line from Schedule A/B:	·		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b>0</b> \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b></b>	
Line from Schedule A/B:	s		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$ \$ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:		\$	<b>-</b> \$	
Line from Schedule A/B:	-		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b>-</b> \$	
Line from Schedule A/B:	· · · · · · · · · · · · · · · · · · ·		■ 100% of fair market value, up to any applicable statutory limit	****
Brief description:		\$	<b></b>	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b>-</b> s	
Line from Schedule A/B:	-		100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b></b>	
Line from Schedule A/B:	· Actions		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b>D</b> \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b>-</b> \$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	-

Official Form 106C

Desc

Additional Page  After listing any entries on this p by 2.4, and so forth.	page, number them beginning with 2.3, followed	Column A  Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name	Commence of the second of the			
Number Street		† 		
	As of the date you file, the claim is: Check all that apply.  Contingent			
City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)	-		
Date debt was incurred	Last 4 digits of account number			
	Describe the property that secures the claim:			
Creditor's Name	Describe the property that secures the claim:	•		•
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
Ch. 210 Code	Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
	Other (including a right to offset)			
<ul> <li>Check if this claim relates to a community debt</li> </ul>		-1:		
Date debt was incurred	Last 4 digits of account number			
Creditor's Name	Describe the property that secures the claim:	\$	\$	\$
Number Street				
	As of the date you file the claim in Obert all that			
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	☐ Unliquidated☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)	-		
Date debt was incurred	Last 4 digits of account number			
	s in Column A on this page. Write that number here:	L	Ī	
	THE HARDEN AND THE COURT OF THE PARTY OF THE	\$	i	
Write that number here:	add the dollar value totals from all pages.	\$		

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property Official Form 106D

page \_\_\_ of \_\_\_ Desc

Larry Eugene Eisenhant
First Name Middle Name Last Name

Case number (1/known) 1:17-6K-00551-MOF

#### Part 2: List Others to Be Notified for a Debt That You Aiready Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

					On which line in Part 1 did you enter the creditor?
_	Name				Last 4 digits of account number
	Number	Street	1-		-
			n-compact of the name	1974 - 1970 - HILLIAND - 1	-
$\Box$	City		State	ZIP Code	-
Ш	Name				On which line in Part 1 did you enter the creditor?  Last 4 digits of account number
					Last 4 digits of account number
	Number	Street			
					-
П	City		State	ZIP Code	On which line in Part 1 did you enter the creditor?
Ш	Name				Last 4 digits of account number
	Number	Street			-
		TEMPORE			_
	City		State	ZIP Code	-
	755.4				On which line in Part 1 did you enter the creditor?
	Name		WTC		Last 4 digits of account number
	Number	Street			-
				remarka may no dise	-
	City	With the same thanks	State	ZIP Code	-
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			-
	A				-
	City		State	ZIP Code	
Ш	Name				On which line in Part 1 did you enter the creditor?  Last 4 digits of account number
	Number	Street		<del> </del>	_
					-
	City	-	State	ZIP Code	

Eilli in this information to identify your case	90			
Debtor 1 Larry Eugene First Name Middle No.	e Eisenhart			
Debtor 2 (Spouse, if filing) First Name Middle Ne	une Lest Name			
United States Bankruptcy Court for the Middl	e District of PA			
Case number 1:17 - 64 -0055	1-MOF			Epopean di
(If known)			☐ Check i amende	
Official Form 106D				
Schedule D: Creditors	Who Have Claims Secure	ed by Prop	perty	12/15
Be as complete and accurate as possible. information. If more space is needed, copy additional pages, write your name and case	f two married people are filing together, both are eq the Additional Page, fill it out, number the entries, a number (if known).	ually responsible f and attach it to this	or supplying correct form. On the top of	t any
1. Do any creditors have claims secured by				
No. Check this box and submit this form Yes. Fill in all of the information below.	to the court with your other schedules. You have nothing	ng else to report on t	this form.	
Part 1: List All Secured Claims				
for each claim. If more than one creditor ha	ore than one secured claim, list the creditor separately is a particular claim, list the other creditors in Part 2. abetical order according to the creditor's name.	Column A  Amount of claim  Do not deduct the value of collateral.	Value of collateral that supports this claim	Column C Unsecured portion If any
21 AVC Mortgage	Describe the property that secures the claim:	179, 897.	\$	\$
Po Box 1880	Single Family Home			
The state of the s	As of the date you file, the claim is: Check all that apply.	4		
Danton 141 45401	☐ Contingent ☐ Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only  Debtor 1 and Debtor 2 only	car loan)  Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)	-		
community debt  Date debt was incurred	Last 4 digits of account number			
Citi Bank	Describe the property that secures the claim:	\$ 71,065.4	8 <sub>s</sub>	\$
Creditor's Name  POBOX 790//0  Number Street	Cabin			
	As of the date you file, the claim is: Check all that apply.			
St Louis, MD 63179	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only Debtor 1 and Debtor 2 only	car loan)  Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)	<del>.</del>		
community debt  Date debt was incurred	Last 4 digits of account number			
4	Column A on this page. Write that number here:	\$	1	
	neur eue eur not de la stration de marie et 🚾 eur de la participat de la verificio de frança de la fact de la fait de la fact de la		_	

Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property page 1 of \_Case 1:17-bk-00551-RNO Doc 14 Filed 03/07/17 Entered 03/08/17 14:58:35 Desc Main Document Page 18 of 43

Det (Spx Unit Case (If k	in this information to identify your case:  otor 1	MDF ho Have Unsecur		15	amende	if this is an ed filing 12/15
A/B: cred	s complete and accurate as possible. Use Part 1 the other party to any executory contracts or un <i>Property</i> (Official Form 106A/B) and on <i>Schedul</i> itors with partially secured claims that are listed led, copy the Part you need, fill it out, number the additional pages, write your name and case num to the contract of Your PRIORITY Unsecured.	expired leases that could result in e G: Executory Contracts and Un- in Schedule D: Creditors Who Ha e entries in the boxes on the left. ber (if known).	a claim. Also lis expired Leases (O eve Claims Secure	it executory contrac Official Form 106G). and by Property. If me	ts on Scho Do not inc ore space	edule clude any is
2. I e r	No. Go to Part 2.  No. Go to Part 2.  Yes.  List all of your priority unsecured claims. If a created claim listed, identify what type of claim it is. If a compriority amounts. As much as possible, list the claim secured claims, fill out the Continuation Page of P. For an explanation of each type of claim, see the insecured claims.	ditor has more than one priority unse claim has both priority and nonprior aims in alphabetical order according art 1. If more than one creditor holds	ity amounts, list that to the creditor's na a particular claim,	at claim here and sho ame. If you have more , list the other credito	ow both price than two ers in Part 3	ority and priority 3.
2.1	Priority Creditor's Name  B 30 2 5 5  Number Street  State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No  Yes	Last 4 digits of account number	: Check all that apply.	s <u>982.97</u> s	iority	Nonpriority amount
2.2	Priority Creditor's Name  Number Street  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  Is the claim subject to offset?  No Yes	Last 4 digits of account number	: Check all that apply aim:			\$

Official Form 106E/F Case 1:17-bk-00551-RNO Schedule E/F: Creditors Who Have Unsecured Claims Doc 14 Filed 03/07/17 Entered 03/08/17 14:58:35 Desc Main Document Page 19 of 43 Larry Eugene Eisenhart Case number (# known) 1:17-6K-00551-MDF

	First Name	Middle Name	Last Name		
David 1.	Your DRIO	DITY IImanous	and Claims	Cantlewalles Bass	

Afte	er listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
	Priority Creditor's Name	Last 4 digits of account number	\$	. \$	. \$
		When was the debt incurred?			
	Number Street	As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			
	City State ZIP Code	☐ Unliquidated			
	7-4-1-2- VIII	☐ Disputed			
	Who incurred the debt? Check one.				
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Domestic support obligations			
	At least one of the debtors and another	☐ Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
	Is the claim subject to offset?	Other. Specify			
	□ No □ Yes				
$\neg$	165				
	Priority Creditor's Name	Last 4 digits of account number	\$	. \$	. \$
	Number Street	When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			
	City State ZIP Code	☐ Unliquidated☐ Disputed☐			
	Who incurred the debt? Check one.				
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	☐ Domestic support obligations			
	Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
	At least one of the debtors and another	Claims for death or personal injury while you were			
	☐ Check if this claim is for a community debt	intoxicated  Other. Specify			
	Is the claim subject to offset?				
	□ No □ Yes				
		Last 4 digits of account number	\$	s	\$
	Priority Creditor's Name		Y	· ·	. Y
	Number Street	When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply.			
	City State ZIP Code	☐ Contingent☐ Unliquidated			
	Who incurred the debt? Check one.	Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	Lights			
	Debtor 1 and Debtor 2 only	Domestic support obligations     Taxes and certain other debts you owe the government			
	At least one of the debtors and another	Claims for death or personal injury while you were			
	☐ Check if this claim is for a community debt	intoxicated  Other. Specify			
	Is the claim subject to offset?				
	□ No				
	Yes				

Schedule E/F: Creditors Who Have Unsecured Claims
Doc 14 Filed 03/07/17 Entered 03/08/17 14:58:35 Desc page of \_\_\_\_ Official Form 106E/F Case 1:17-bk-00551-RNO

Larry Eugene Eisenhart
First Name Middle Name Last Name

Case number (if known) 1:17-64-00661-MDF

### Part 2:

### List All of Your NONPRIORITY Unsecured Claims

3.	Do any creditors have nonpriority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the Yes		
	nonpriority unsecured claim, list the creditor separately for each claim.	der of the creditor who holds each claim. If a creditor has more than one For each claim listed, identify what type of claim it is. Do not list claims already t the other creditors in Part 3.If you have more than three nonpriority unsecure	
		Total claim	
.1		Last 4 digits of account number	
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street	When was the debt incurred?	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only	Type of NONDBIODITY uncoursed claims	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	□ No □ Yes	Other. Specify	
1.2	ľ	Last 4 digits of account number\$	
2	Nonpriority Creditor's Name	When was the debt incurred?	
	recriptionly Creater 5 realite	THE I WAS DIE VEDI III GIT GIT	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated	
		☐ Disputed	
	Debtor 1 only Debtor 2 only		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
		Obligations arising out of a separation agreement or divorce	
	☐ Check if this claim is for a community debt	that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	□ No	Other. Specify	
	Yes		
4.3		Last 4 digits of account number	
	Nonpriority Creditor's Name	When was the debt incurred?	-
	Number Street		
	ASSOCIATION CONTRACTOR	As of the date you file, the claim is: Check all that apply.	
	City State ZiP Code	- 1 전 - 1 전 - 1 전 - 1 전 - 1 전 - 1 전 - 1 전 - 1 전 - 1 전 - 1 전 - 1 전 - 1 전 - 1 전 - 1 전 - 1 전 - 1 전 - 1 전 - 1 전 - - 1 프로그램 - 1 전	
	Who incurred the debt? Check one.	Contingent	
	Debtor 1 only	Unliquidated	
	Debtor 2 only	Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	The second secon	
	170 MAIN INTERPORT OF NOVELET MET SPECIAL SIN	Student loans	
	☐ Check if this claim is for a community debt	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	□ No	Other. Specify	
	Yes		

Larry Eugene Eisenhart
First Name Middle Name Last Nama

Case number (# known) 1:17-6k-00551-MDF

Part 2:

#### Your NONPRIORITY Unsecured Claims - Continuation Page

Nonpriority Creditor's Name    Number   Street   State   ZIP Code   Contingent   Unliquidated	\$
Number Street  As of the date you file, the claim is: Check all that apply.  City State ZIP Code   Contingent   Unliquidated   Disputed    Who incurred the debt? Check one.   Debtor 1 only   Debtor 2 only   Student loans   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Debts to pension or profit-sharing plans, and other similar debts    No   Yes   Last 4 digits of account number   When was the debt incurred?    As of the date you file, the claim is: Check all that apply.  City State ZIP Code   Contingent   Unliquidated    Unliquidated   Disputed    Who incurred the debt? Check one.   Debtor 1 only    Debtor 1 only   Type of NONPRIORITY unsecured claim:	
As of the date you file, the claim is: Check all that apply.  City State ZIP Code Contingent Unliquidated  Disputed  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes  Last 4 digits of account number  Number Street  As of the date you file, the claim is: Check all that apply.  Last 4 digits of account number  Last 4 digits of account number  As of the date you file, the claim is: Check all that apply.  City State ZIP Code  Unliquidated  Disputed  Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 1 only Check if this claim is for a community debt Is the claim subject to offset? No Yes  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  City State Zip Code Contingent Uniquidated Uniquidated Debtor 1 only Debtor 2 only  Type of NONPRIORITY unsecured claim:  Type of NONPRIORITY unsecured claim:  Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 1 only Check if this claim is for a community debt Is the claim subject to offset? No Yes  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  City State Zip Code Contingent Uniquidated Uniquidated Debtor 1 only Debtor 2 only  Type of NONPRIORITY unsecured claim:  Type of NONPRIORITY unsecured claim:  Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes  Last 4 digits of account number  Nompriority Creditor's Name  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  City State ZIP Code Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor to pension or profit-sharing plans, and other similar debts Other. Specify  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  City State ZIP Code Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim:	
Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 3 only Check if this claim is for a community debt State claim subject to offset? No Yes  Last 4 digits of account number  Nonpriority Creditor's Name  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  City State ZIP Code Unliquidated Debtor 1 only Debtor 2 only  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtos to pension or profit-sharing plans, and other similar debts Other. Specify Other. Specify  Cother. Specify  Cother. Specify  Cother. Specify  Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  City State ZIP Code Unliquidated Debtor 2 only  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Cother. Specify  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply. Unliquidated Disputed  Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No Yes  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  City  State  ZIP Code  Contingent  Unliquidated  Debtor 1 only  Debtor 2 only  Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	
Check if this claim is for a community debt  Is the claim subject to offset?  No Yes  Last 4 digits of account number  Number Street  As of the date you file, the claim is: Check all that apply.  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Type of NONPRIORITY unsecured claim:	
Debts to pension or profit-sharing plans, and other similar debts    Debts to pension or profit-sharing plans, and other similar debts   Other. Specify	
□ No □ Yes  Last 4 digits of account number  Nonpriority Creditor's Name  When was the debt incurred?  Number Street  As of the date you file, the claim is: Check all that apply.  City State ZIP Code □ Contingent □ Unliquidated □ Debtor 1 only □ Debtor 2 only  Last 4 digits of account number □ When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Type of NONPRIORITY unsecured claim:	
Yes   Last 4 digits of account number	
Nonpriority Creditor's Name  When was the debt incurred?  Number Street  As of the date you file, the claim is: Check all that apply.  City State ZIP Code Contingent Unliquidated Unliquidated Debtor 1 only Debtor 2 only  Last 4 digits of account number  When was the debt incurred?  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:	
Number Street  As of the date you file, the claim is: Check all that apply.  City State ZIP Code Contingent Unliquidated Who incurred the debt? Check one. Debtor 1 only Debtor 2 only  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  City State ZIP Code Disputed Type of NONPRIORITY unsecured claim:	
Number Street  As of the date you file, the claim is: Check all that apply.  City State ZIP Code Contingent Unliquidated Who incurred the debt? Check one. Debtor 1 only Debtor 2 only  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  City State ZIP Code Disputed Type of NONPRIORITY unsecured claim:	s
Number Street  As of the date you file, the claim is: Check all that apply.  City State ZIP Code Contingent Unliquidated Unliquidated Disputed  Debtor 1 only Debtor 2 only  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  City State ZIP Code Disputed  Type of NONPRIORITY unsecured claim:	·
As of the date you file, the claim is: Check all that apply.  City State ZIP Code Contingent Unliquidated Unliquidated Disputed  Debtor 1 only Debtor 2 only  Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only  Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only  Unliquidated Disputed  Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only  Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 only ☐ Debtor 2 only ☐ Type of NONPRIORITY unsecured claim:	
Debtor 2 only  Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only	
Constitution of the debter and control	
Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt ☐ Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	
□ No	
☐ Yes	
Last 4 digits of account number	\$
Nonpriority Creditor's Name  When was the debt incurred?	
Number Street As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	
☐ Unliquidated	
Who incurred the debt? Check one.	
Debtor 1 only	
☐ Debtor 2 only Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	
At least one of the debtors and another  Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt  you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	
□ No □ Yes	

Debtor 1

Larry Eugene Eisenhart
First Name Middle Name Last Name

Case number (# Known) 1:17-6K-0651-MOF

Part 3:

#### List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

On which entry in Part 1 or Part 2 did you list the original creditor?

Name

Line \_\_\_\_\_ of (Check one): □ Part 1: Creditors with Priority Unsecured Claim

Part 2: Creditors with Nonpriority Unsecured C

				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
			***********	Last 4 digits of account number
City		State	ZIP Code	
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
City		State	ZIP Code	Last 4 digits of account number
	-44			On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
<u> </u>		State	ZIP Code	Last 4 digits of account number
City		State	ZIP COOR	On which entry in Part 1 or Part 2 dld you list the original creditor?
Name				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account number
City	8111,111 M 82,11	State	ZIP Code	
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
City		State	ZIP Code	Last 4 digits of account number
1000000				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street		1	☐ Part 2: Creditors with Nonpriority Unsecured
				Claims
City	- <del> </del>	State	ZIP Code	Last 4 digits of account number
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
04.		Chota	7ID Code	Last 4 digits of account number

Larry Eugene Eisenhart

Case number (# known) 1:17 - 6 K - 00551 - MDF

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		l Otal claim
Total claims	6a. Domestic support obligations	6a. \$
from Part 1	6b. Taxes and certain other debts you owe the government	6b. <sub>\$</sub>
	6c. Claims for death or personal injury while you were intoxicated	6c. \$
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <sub>\$</sub>
	6e. Total. Add lines 6a through 6d.	6e
		Total claim
Total claims	6f. Student loans	6f. \$
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <sub>\$</sub>
	<ol><li>Other. Add all other nonpriority unsecured claims. Write that amount here.</li></ol>	6i. + <b>\$</b>
		0.1/

Fill i	n this information to identify your case:		
Debto	Larry Eugene Eisenhart		
10000000	First Name Middle Name Last Name		
100000	se, if filing) First Name Middle Name Last Name	-	
Unite	d States Bankruptcy Court for the date District of		
Case	number 1:11-64-00551-MOF		
(If kno	nwn)		Check if this is an
90 00			amended filing
Offi	cial Form 106H		
Scl	nedule H: Your Codebtors		12/15
are fill	otors are people or entities who are also liable for any debts you may having together, both are equally responsible for supplying correct information the entries in the boxes on the left. Attach the Additional Page to number (if known). Answer every question.	tion. If more space is n	eeded, copy the Additional Page, fill it out,
74.5 S. S. S.	o you have any codebtors? (If you are filing a joint case, do not list either s	pouse as a codebtor.)	
	Yes		
1877	Vithin the last 8 years, have you lived in a community property state or turizona. California. Idaho. Louisiana. Nevada. New Mexico. Puerto Rico, Text		
	No. Go to line 3.	a, managem, and management	,
0	Yes. Did your spouse, former spouse, or legal equivalent live with you at t	ne time?	
	□ No	0200-000	CHI SING WATER
	☐ Yes. In which community state or territory did you live?		and current address of that person.
	Name of your spouse, former spouse, or legal equivalent		
	Number Street	<del></del>	
	City State ZIP Co		
8	n Column 1, list all of your codebtors. Do not include your spouse as a chown in line 2 again as a codebtor only if that person is a guarantor or schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or schedule E/F, or Schedule G to fill out Column 2.	cosigner. Make sure yo	u have listed the creditor on
	Column 1: Your codebtor	Column 2	2: The creditor to whom you owe the debt
		Check a	Il schedules that apply:
3.1		Sch	edule D, line
	Name	☐ Sch	edule E/F, line
	Number Street	☐ Sch	edule G, line
	City State ZIP	Code	
3.2		□ Sch	edule D, line
In the state of	Name		edule E/F, line
	Number Street		edule G, line
	City State ZIP	Code	
3.3		D	adula D. Kan
	Name		edule D, line edule E/F, line
	Number Street		edule G, line
		Code	ADAGAN MARKAMATANAN
	City State ZIP	Over 0	

Official Form 106H Case 1:17-bk-00551-RNO

City

State

page 1 of \_\_ Desc

# **Additional Page to List More Codebtors**

	Column 1: \	our codebtor			Column 2: The creditor to whom you owe the del
3					Check all schedules that apply:
ب	Name				Schedule D, line
	Number	Street			Schedule G, line
	City	************	State	ZIP Code	
3	Name				☐ Schedule D, line
					☐ Schedule E/F, line
	Number	Street	WWW.W		☐ Schedule G, line
П	City	· · · · · · · · · · · · · · · · · · ·	State	ZIP Code	
3	Name				☐ Schedule D, line
					☐ Schedule E/F, line
	Number	Street			☐ Schedule G, line
$\Box$	City		State	ZIP Code	
3	Name				☐ Schedule D, line
	Name				☐ Schedule E/F, line
	Number	Street			☐ Schedule G, line
	City		State	ZIP Code	
3	Name				☐ Schedule D, line
	Name				☐ Schedule E/F, line
	Number	Street			☐ Schedule G, line
	City		State	ZIP Code	
3					Schedule D, line
	Name				Schedule E/F, line
	Number	Street			☐ Schedule G, line
	City		State	ZIP Code	
3					☐ Schedule D, line
	Name				☐ Schedule E/F, line
	Number	Street			Schedule G, line
3.	City		State	ZIP Code	
نعت		V			☐ Schedule D, line
	Name				☐ Schedule E/F, line
	Number	Street			☐ Schedule G, line
	City		State	7IP Code	

Official Form 106l  Schedule I: You  Be as complete and accurate as posupplying correct information. If you figure to this form. On the	Middle Name  Middle Name  Middle Name  Middle District of 1  00561-M0  Ir Income  resible. If two married people are married and not fill see is not filling with you, top of any additional page	ing jointly, and yo do not include inf	ur spou ormatio	A sup incom  MM / I  ebtor 1 and Debt se is living with a nabout your spo	plement showing e as of the following to 7 YYYY  or 2), both are equivou, include informaties. If more space	12/15 ally responsible for nation about your spouse. is needed, attach a
Part 1: Describe Employm	ent			<del>wn 1</del>		
<ol> <li>Fill In your employment information.</li> </ol>		Debtor 1			Debtor 2 or n	on-filing spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed Not employ	ed		☐ Employed ☐ Not emplo	
Include part-time, seasonal, or self-employed work.	Occupation					2.4
Occupation may include student or homemaker, if it applies.	Employer's name					
	Linployer a name			**************************************		
	Employer's address	Number Street			Number Street	
		City	State	ZIP Code	City	State ZIP Code
	How long employed the	re?				
Part 2: Give Details About	Monthly Income					
Estimate monthly income as of spouse unless you are separated If you or your non-filing spouse had below. If you need more space, a	ave more than one employe	er, combine the info				
				For Debtor 1	For Debtor 2 o	
List monthly gross wages, sal deductions). If not paid monthly,			2.	, 00	non-filing spo	USO OPPRISONED
3. Estimate and list monthly over			3. +	\$ 00	+ \$	
4. Calculate gross income. Add to	ne 2 + line 3.		4.	\$	\$	

Official Form 106l Schedule I: Your Income

			For Debtor 1	For Debtor 2 or non-filing spouse	
(	Copy line 4 here	4.	\$	\$	
5. <b>L</b>	ist all payroll deductions:				
	5a. Tax, Medicare, and Social Security deductions	5a.	\$	\$	
	5b. Mandatory contributions for retirement plans	5b.	\$	\$	
	5c. Voluntary contributions for retirement plans	5c.	\$	\$	
	5d. Required repayments of retirement fund loans	5d.	\$	\$	
	5e. Insurance	5e.	\$	\$	
	5f. Domestic support obligations	5f.	\$	\$	
	5g. Union dues	5g.	\$	\$	
	5h. Other deductions. Specify:	5h.	+\$	+ \$	
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$ .	6.	\$	\$	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	\$	
8.	List all other income regularly received:				
	8a. Net Income from rental property and from operating a business, profession, or farm				
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	\$	
	8b. Interest and dividends	8b.	\$	\$	
	8c. Family support payments that you, a non-filing spouse, or a dependence regularly receive	nt			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	\$	
	8d. Unemployment compensation	8d.	\$	\$	
	8e. Social Security	8e.	\$	\$	
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	ce			
	Specify:	8f.	\$	\$	
	8g. Pension or retirement income	8g.	\$	\$	
	8h. Other monthly income. Specify:	8h.	+\$	+\$	
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	\$	
	Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	+   \$=	\$
	State all other regular contributions to the expenses that you list in Sched Include contributions from an unmarried partner, members of your household, y friends or relatives.			mmates, and other	
	Do not include any amounts already included in lines 2-10 or amounts that are	not av	vailable to pay expen	nses listed in Schedule J.	
	Specify:			11. +	\$
	Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain S				\$
	•			12.	Combined monthly income
13	Do you expect an increase or decrease within the year after you file this f	orm?			
	☐ Yes. Explain:				3

Fill in this information to identify your case:  Debtor 1		Check if this is:  An amended  A supplement expenses as  MM / DD / YYY	t showing postp of the following	petition chapter 13 date:
Official Form 106J				
Schedule J: Your Expens	es			12/15
Be as complete and accurate as possible. If two married information. If more space is needed, attach another she (if known). Answer every question.	[2] [2] [1] [2] [2] [2] [2] [2] [2] [2] [2] [2] [2	맛있다면 얼마나 어린 아들은 사람이 되었다면 하는 것이 없는데 하는데 되었다.		714 <del>- 1</del> 4
Part 1: Describe Your Household				
1. Is this a joint case?				
No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?				
<ul><li>□ No</li><li>□ Yes. Debtor 2 must file Official Form 106J-2,</li></ul>	Expenses for Separate Househo	old of Debtor 2.		
2. Do you have dependents? No Do not list Debtor 1 and Yes. Fill out this in	Dependent's rei		Dependent's age	Does dependent live with you?
Debtor 2. each dependent  Do not state the dependents' names.	501	en e	14	□ No □ Yes
	*************			□ No □ Yes
	<u>Lineary particles in the Company of the Company of</u>			☐ No ☐ Yes
	***************************************		-	☐ No ☐ Yes
				☐ No ☐ Yes
3. Do your expenses include expenses of people other than yourself and your dependents?				
Part 2: Estimate Your Ongoing Monthly Expens	es			
Estimate your expenses as of your bankruptcy filing date expenses as of a date after the bankruptcy is filed. If this applicable date.		1,540		
Include expenses paid for with non-cash government as such assistance and have included it on Schedule I: You			Your expe	nses
The rental or home ownership expenses for your resi any rent for the ground or lot.	45 V. V. S. 186 186 18		* Estatut. A Carate conference and to	29.00 Mon
If not included in line 4:				-6 -6
4a. Real estate taxes		4a	s 470	56.88
4b. Property, homeowner's, or renter's insurance		4b	s 76	8.00 yr
<ul> <li>4c. Home maintenance, repair, and upkeep expenses</li> <li>4d. Homeowner's association or condominium dues</li> </ul>		4c 4d		VA

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Schedule J: Your Expenses

Official Form 106J

			rour expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	ass the above for the first control of the control
6.	Utilities:		
334	sa. Electricity, heat, natural gas	6a.	\$ 185.00
	6b. Water, sewer, garbage collection	6b.	\$ 25.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$ 150.00
	6d. Other. Specify:	6d.	\$
7.	Food and housekeeping supplies	7.	\$ 400.00
8.	Childcare and children's education costs	8.	\$
9.	Clothing, laundry, and dry cleaning	9.	\$
10.	Personal care products and services	10.	\$
11.	Medical and dental expenses	11.	\$
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.	12.	\$
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14.	\$
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	s N/A
	15d. Other insurance. Specify:	15d.	\$
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$
17.	Installment or lease payments:		1
	17a. Car payments for Vehicle 1	17a.	s_ N/B
	17b. Car payments for Vehicle 2	17b.	s N/A
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106).	18.	\$
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ie.	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

Debtor 1	Larry	Eu	gene	Eise	enhart
Deptor I	First Name	Middle Name	Last N	ame	

21. Ot	her. Specify:	21.	+\$_	
22. <b>Ca</b>	iculate your monthly expenses.			
22	a. Add lines 4 through 21.	22a.	\$	760.00
22	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$	
22	c. Add line 22a and 22b. The result is your monthly expenses.	22c.	\$	760.00
23. <b>Cal</b>	culate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$_	00
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$_	00
23c.	Subtract your monthly expenses from your monthly income.  The result is your monthly net income.	23c	\$_	00

#### 24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

X No.

☐ Yes. Explain here:

		Section College Co.	
Fill in this information to identify your case:			
Debtor 1 Larry Eugene E	isenhar Last Name	+	
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name		
United States Bankruptcy Court for the: Middle District	$\Omega I$		
Case number 1:17 - 6k - 00551 - 1			
(If known)			Check if this is an amended filing
Official Form 107			
Statement of Financial Affair	rs for Indiv	iduals Filing for Bankrunto	V 04/16
Be as complete and accurate as possible. If two marrinformation. If more space is needed, attach a separa number (if known). Answer every question.  Part 1: Give Details About Your Marital Star	led people are filing ate sheet to this for	together, both are equally responsible for supplem. On the top of any additional pages, write your	ying correct
What is your current marital status?	1		*
☐ Married			
Mot married			
<ul> <li>During the last 3 years, have you lived anywhere</li> <li>No</li> <li>Yes. List all of the places you lived in the last 3 y</li> <li>Debtor 1:</li> </ul>	=\		Dates Debtor 2
		☐ Same as Debtor 1	☐ Same as Debtor 1
	From		. From
Number Street	То	Number Street	То
	-		<b>4</b> :
City State ZIP Code	_	City State ZIP Code	
		☐ Same as Debtor 1	☐ Same as Debtor 1
S-200	. From		From
Number Street	То	Number Street	To
	-		
City State ZIP Code	-	City State ZIP Code	
Within the last 8 years, did you ever live with a s states and territories include Arizona, California, Ida	pouse or legal equi	valent in a community property state or territory? da, New Mexico, Puerto Rico, Texas, Washington, a	(Community property nd Wisconsin.)
⊠ No			
☐ Yes. Make sure you fill out Schedule H: Your Co	odebtors (Official For	m 106H).	
Part 2: Explain the Sources of Your Income	Fl	Individuals Elling for Bankaustov	page 1

				The state of the s		
4.	Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.					
	No Yes. Fill in the details.					
		Debtor 1		Debtor 2		
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of Income Check all that apply.	Gross income (before deductions and exclusions)	
	From January 1 of current year until the date you filed for bankruptcy:	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$	☐ Wages, commissions, bonuses, tips ☐ Operating a business	\$	
	For last calendar year: (January 1 to December 31,)	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$	
	For the calendar year before that:	☐ Wages, commissions,		☐ Wages, commissions,		
	(January 1 to December 31,)	bonuses, tips  Operating a business	\$	bonuses, tips  Operating a business	\$	
5.	Did you receive any other income during the Include income regardless of whether that income memployment, and other public benefit paymengambling and lottery winnings. If you are filing List each source and the gross income from each No  Yes. Fill in the details.	orne is taxable. Examples ents; pensions; rental inco a joint case and you have	of other income are alinome; interest; dividends; a income that you receive	money collected from laws ed together, list it only once	uits; royalties; and	
		Debtor 1		Debtor 2		
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	
	From January 1 of current year until		\$		\$	
	the date you filed for bankruptcy:		\$	· · · · · · · · · · · · · · · · · · ·	· \$	
			\$		\$	
	For last calendar year:	THE STATE OF THE S	\$	January Street, and the Control of t	. \$	
	(January 1 to December 31,)		\$	***************************************	\$	
	2011	7	\$		\$	
	For the calendar year before that:		\$		\$	
	(January 1 to December 31,					
	YYYY		\$		\$	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Lyrry Eugene Eisenhart
First Name Middle Name Lest Name

Case number (# known) 1:17 - 6 K - 00551 - MDF

Part 3:

List Certain Payments You Made Before You Filed for Bankruptcy

6.	Are eith	ner Debtor 1's or Debtor 2's debts primarily	consumer deb	ts?							
	🖄 No.	Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."									
		During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425° or more?									
		☐ No. Go to line 7.									
		Yes. List below each creditor to whom you total amount you paid that creditor. child support and alimony. Also, do	Do not include p	payments for domestic su	upport obligations, such as						
		* Subject to adjustment on 4/01/19 and ever									
	□ vee	. Debtor 1 or Debtor 2 or both have primari	lly consumer de	shte							
	<b>—</b> 163	During the 90 days before you filed for bank			\$600 or more?						
			raptoy, and you p	ay any dicultor a total of	4000 of more:						
		☐ No. Go to line 7.									
		Yes. List below each creditor to whom you creditor. Do not include payments falimony. Also, do not include payments.	or domestic supp	port obligations, such as	child support and						
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for					
				\$	\$	☐ Mortgage					
		Creditor's Name	-			☐ Car					
			_			Credit card					
		Number Street				Loan repayment					
						_					
						Suppliers or vendors					
		City State ZIP Code				Other					
				\$	\$	☐ Mortgage					
		Creditor's Name				☐ Car					
		Number Street				Credit card					
		Hamba Stock				Loan repayment					
						Suppliers or vendors					
			_			☐ Other					
		City State ZIP Code									
				\$	\$	☐ Mortgage					
		Creditor's Name				☐ Car					
						Credit card					
		Number Street				Loan repayment					
			-			Suppliers or vendors					
			_			Other					
		City State ZIP Code									

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

7.	Inside corpor agent	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.						
	M No							
		es. List all payments to	an insider					
	<b>—</b> 10	es. List an payments to	Jan moider.					B
					Dates of payment	Total amount paid	owe	Reason for this payment
						\$	\$	
	Ī	nsider's Name			-			
	ī	Number Street						
	i	City	State ZIP C	Code				
						\$	S	
	ī	nsider's Name	C141010-18-18-18-18-18-18-18-18-18-18-18-18-18-			·		
	ī	Number Street						
		City	State ZIP (	Code				
8.	an ins	sider? le payments on debts	guaranteed or cos	signed by		Total amount	Amount you still	n account of a debt that benefited  Reason for this payment  Include creditor's name
		Insider's Name				\$	\$	
		Insider's Name						
			100000					
		Number Street						
	Ŋ,	City	State ZIP	Code				
						\$	\$	
		Insider's Name				<u> </u>	- *	
		margor a realing						
	10				22772			
		Number Street			W-W			
					. <del></del>			
		City	State ZIP	Code				

City

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Larry Eugene Eisenhart
First Name Middle Name Lest Name Case number (# known) 1:17-64-00551-MDF

Part 4: Identify Legal Actions, Reposse	ssions, and Foreclosures	77(7) - 2	Marie and the second second second second
<ul> <li>Within 1 year before you filed for bankruptcy List all such matters, including personal injury of and contract disputes.</li> </ul>	, were you a party in any lawsuit, court action, or actions, small claims actions, divorces, collection suits, page 15.	dministrative proce aternity actions, supp	eding? ort or custody modification:
₽ No			
Yes. Fill in the details.			
	Nature of the case Court or agency		Status of the case
Case title	Court Name		Pending
			On appeal
	Number Street		Concluded
Case number			
	City	State ZIP Code	
Case title	Court Name		Pending
	Contraine		On appeal
	Number Street		Concluded
Construction			
Case number	City	State ZIP Code	
No. Go to line 11.  Yes. Fill in the information below.	, was any of your property repossessed, foreclosed	i, garnished, attach	ed, seized, or levied?
Check all that apply and fill in the details below.  No. Go to line 11.	was any of your property repossessed, foreclosed  Describe the property	l, garnished, attach Date	ed, seized, or levied?  Value of the property
Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.			Value of the property
Check all that apply and fill in the details below.  No. Go to line 11.			
Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.	Describe the property		Value of the property
Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.			Value of the property
Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.	Describe the property  Leading what happened Property was repossessed.		Value of the property
Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  PNC MoHgqqe  Creditor's Name  Graditor's Name  1820	Explain what happened Property was repossessed. Property was foreclosed.		Value of the property
Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  PNC Montgage  Creditor's Name  Creditor's Name  Dayfon OH  454	Explain what happened Property was repossessed. Property was foreclosed. Property was garnished.	Date	Value of the property
Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  PNC MoHgqqe  Creditor's Name  Graditor's Name  1820	Explain what happened  Property was repossessed.  Property was foreclosed.  Property was garnished.  Property was attached, seized, or levied.	Date	Value of the property
Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  PNC Montgage  Creditor's Name  Creditor's Name  Dayton OH  454	Explain what happened Property was repossessed. Property was foreclosed. Property was garnished.	Date	Value of the property
Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  PNC Montgage  Creditor's Name  Creditor's Name  Dayton OH  454	Explain what happened  Property was repossessed.  Property was foreclosed.  Property was garnished.  Property was attached, seized, or levied.	Date	Value of the property
Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  PNC Montgage  Creditor's Name  Creditor's Name  Dayfon OH  454	Explain what happened  Property was repossessed.  Property was foreclosed.  Property was garnished.  Property was attached, seized, or levied.	Date	Value of the property  \$  Value of the property
Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  PNC Montgage  Creditor's Name  The Bean Revision of the property	Explain what happened  Property was repossessed.  Property was foreclosed.  Property was garnished.  Property was attached, seized, or levied.	Date	Value of the property  \$  Value of the property
Creditor's Name	Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, seized, or levied. Describe the property  Explain what happened	Date	Value of the property  \$  Value of the property
Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  PNC Modgage  Creditor's Name  The property of th	Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, seized, or levied. Describe the property  Explain what happened Property was repossessed.	Date	Value of the property  \$  Value of the property
Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  PNC MoHgqq e  Creditor's Name  THE State ZIP Cod  Creditor's Name  Creditor's Name	Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, seized, or levied. Describe the property  Explain what happened Property was repossessed. Property was foreclosed. Property was foreclosed.	Date	Value of the property  \$  Value of the property

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

			tcy, did any creditor, including a bank or financial institu	ition, set off any arr	ounts from your
₽ No					
Yes. Fill	in the details.				
			Describe the action the creditor took	Date action was taken	Amount
Creditor's N	ame			25 (8)	
Number :	Street				\$
1. <del>1 </del>					
City	State	ZIP Code	Last 4 digits of account number: XXXX	-	
			ry, was any of your property in the possession of an assi todian, or another official?	gnee for the benefi	t of
Part 5: List	Certain Gifts an	d Contribut	ilons		
No Yes. Fill	in the details for eac	h gift.	cy, did you give any gifts with a total value of more than  Describe the gifts	Dates you gave the gifts	Value
Person to V	Vhom You Gave the Gift			,	\$
					\$
Number	Street	A. 14 post 100 post 1			
City	State	ZIP Code			
Person's i	relationship to you				
Gifts with per perso	a total value of more	than \$600	Describe the gifts	Dates you gave the gifts	Value
Person to V	Vhorn You Gave the Gift				\$
***************************************				<del>2011-01-01-0</del>	\$
Number	Street				
City	State	ZIP Code			
Person's	relationship to you				

Statement of Financial Affairs for Individuals Filing for Bankruptcy

14. Wit	thin 2 years before you filed for bankrup	tcy, did you give any gifts or contributions with a total value	e of more than \$60	0 to any charity?
X	No			
30.000	Yes. Fill in the details for each gift or contr	ibution.		
	Gifts or contributions to charities	Describe what you contributed	Date you	Value
	that total more than \$600		contributed	Value
	Charity's Name			\$
	<u> </u>			\$
	Number Street			
	City State ZIP Code			
Part (	6: List Certain Losses			
dis	thin 1 year before you filed for bankrupto saster, or gambling? No	cy or since you filed for bankruptcy, did you lose anything	because of theft, f	ire, other
	Yes. Fill in the details.			
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
			-	\$
Part	7: List Certain Payments or Trans	eta-r-		
		cy, did you or anyone else acting on your behalf pay or trar	nsfer any property	to anyone
yo	u consulted about seeking bankruptcy o		21/52 N 381	
×	No	parets, or credit counseling agencies for services required in yo	our barmaptoy.	
Ц	Yes. Fill in the details.			
	and the second s	Description and value of any property transferred	Date payment or transfer was	Amount of payment
	Person Who Was Paid		made	
	Number Street		******	\$
			<del>((-)</del>	\$
	City State ZIP Code			
	Email or website address			
	Person Who Made the Payment, if Not You			

Statement of Financial Affairs for Individuals Filing for Bankruptcy

				Description and value of any property to	ransferred	Date payment or transfer was made	Amount of payment
	Person Who Was Paid						\$
	Number Street					-	\$
						Approximation of the second	<b></b>
	City	State	ZIP Code				
	Email or website address			70			
	Person Who Made the Pa	ayment, if I	Not You				
Do I		deal with ment or t	h your credit	cy, did you or anyone else acting on y ors or to make payments to your cred ou listed on line 16.		ster any property	to anyone who
				Description and value of any property to	ransferred	Date payment or transfer was made	Amount of paymen
	Person Who Was Paid					THE COURT OF THE C	
	Number Street					A	\$
	***************************************	201000000					\$
Inclu Do I	sferred in the ordinate both outright transport include gifts and	nary con nsfers a transfer	urse of your l nd transfers n	otcy, did you sell, trade, or otherwise to business or financial affairs? nade as security (such as the granting over already listed on this statement.	f a security interest or m	ortgage on your pro	operty).
				Description and value of property transferred	Describe any property or debts paid in exchan		d Date transfer was made
	Person Who Received Tr	ensfer					
	Number Street						
	City	State	ZIP Code				
	Person's relationship	to you					
	Person Who Received Tr	ansfer					-
	Number Street						
	City	State	ZIP Code				
	Person's relationship	to you					

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	thin 10 years before you filed for bankrup a beneficiary? (These are often called as		ty to a self-settled trus	t or similar device of w	vhich you
-	No Yes. Fill in the details.				
		Description and value of the prope	rty transferred		Date transfer was made
	Name of trust				
Part 8	B: List Certain Financial Accounts	, Instruments, Safe Deposit	Boxes, and Storage	Units	
inc	thin 1 year before you filed for bankrupto sed, sold, moved, or transferred? clude checking, savings, money market, o okerage houses, pension funds, coopera	or other financial accounts; certi	ficates of deposit; sha		
	No Yes. Fill in the details.				
		Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Name of Financial Institution	xxxx	Checking		\$
	Number Street		Savings  Money market		
			☐ Brokerage		
	City State ZIP Code		☐ Other		
	Name of Financial Institution	xxxx	Checking Savings	·	<b>\$</b>
	Number Street		Money market		
			☐ Brokerage ☐ Other		
	City State ZIP Code				
Se	you now have, or did you have within 1 curities, cash, or other valuables?  No Yes, Fill in the details.	year before you filed for bankru	otcy, any safe deposit i	oox or other depositor	y for
_	res. Fill in the details.	Who else had access to it?	Describe the	e contents	Do you still have it?
					□ No
	Name of Financial Institution	Name			Yes
	Number Street	Number Street			
	City State ZIP Code	City State ZIP Code	**************************************		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

22. Have y		or place other than your home wi	thin 1 year before you filed for bankruptcy?	
	s. Fill in the details.			
		Who else has or had access to it?	Describe the contents	Do you still have it?
				□ No
Ĩ	Name of Storage Facility	Name	<del></del>	☐ Yes
ī	Number Street	Number Street	<del>and the second of the second </del>	
-		City State ZiP Code		
7	City State ZIP Code			
Part 9:	Identify Property You Hold o			
	old in trust for someone.	omeone eise owns r include any	property you borrowed from, are storing for,	
Ø N	The company and comment of the contract			
<b>□</b> Y <sub>0</sub>	es. Fill in the details.	Man la Manage 4 A	B	V-1
		Where is the property?	Describe the property	Value
7	Owner's Name			\$
25	Number Street	Number Street		
	number suret			
,	City State ZIP Code	City State Zi	P Code	
Part 10	Give Details About Environm	nental Information		<del></del>
	ourpose of Part 10, the following defir			_
hazar		material into the air, land, soil, s	onceming pollution, contamination, releases o urface water, groundwater, or other medium, es, wastes, or material.	f
	neans any location, facility, or proper e it or used to own, operate, or utilize		nental law, whether you now own, operate, or	
	rdous material means anything an entance, hazardous material, pollutant, d		ardous waste, hazardous substance, toxic	
Report a	ill notices, releases, and proceedings	that you know about, regardless	of when they occurred.	
24. Has a	ny governmental unit notified you tha	t you may be liable or potentially	liable under or in violation of an environmenta	l law?
⊠ N	0			
	es. Fill in the details.			
		Governmental unit	Environmental law, if you know it	Date of notice
Na	ame of site	Governmental unit	•	
N	umber Street	Number Street		
_		City State ZIP Code	-	
c	Ity State ZIP Code			

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Larry Eugene Eisenhart
First Name Model Name Last Name

Case number (# known) 1:17 - 6K - 00.551 \* MOF

Yes. Fill in the details.			
	Governmental unit	Environmental law, if you know it	Date of notic
Name of site	Governmental unit		, <del>10 10 10 10 10 10 10 10 10 10 10 10 10 1</del>
		2.1	
Number Street	Number Street	•	
	City State ZIP Code	-	
City State ZIP Co	de		
ve you been a party in any judicial o	or administrative proceeding under ar	y environmental law? Include settleme	nts and orders.
No			
Yes. Fill in the details.			
	Court or agency	Nature of the case	Status of tr
Case title	Court Name	<del>55.5</del> 4	Pendin
	Sout Hallo		On app
	<u>4-27-09</u> )		
	Number Street		☐ Conclu
	City State ZIP Corr Business or Connections to An	y Business	
11: Give Details About Your thin 4 years before you filed for bar	City State ZIP Cor r Business or Connections to Any nkruptcy, did you own a business or i	Business ave any of the following connections to	
11: Give Details About Your thin 4 years before you filed for bar A sole proprietor or self-emplo	City State ZIP Cor T Business or Connections to Any inkruptcy, did you own a business or for byed in a trade, profession, or other a	r Business ave any of the following connections to	
11: Give Details About Your thin 4 years before you filed for bar A sole proprietor or self-emplo A member of a limited liability	City State ZIP Cor r Business or Connections to Any nkruptcy, did you own a business or i	r Business ave any of the following connections to	
11: Give Details About Your thin 4 years before you filed for bar A sole proprietor or self-emplo A member of a limited liability A partner in a partnership	r Business or Connections to Any nkruptcy, did you own a business or it byed in a trade, profession, or other a company (LLC) or limited liability par	r Business ave any of the following connections to	
11: Give Details About Your thin 4 years before you filed for bar A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managin	r Business or Connections to Any nkruptcy, did you own a business or it byed in a trade, profession, or other a company (LLC) or limited liability par	r Business eave any of the following connections to ctivity, either full-time or part-time mership (LLP)	
thin 4 years before you filed for bar A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managir An owner of at least 5% of the	Residence of Connections to Any intruptcy, did you own a business or foreign a trade, profession, or other accompany (LLC) or limited liability paring executive of a corporation voting or equity securities of a corporation to Part 12.	r Business  ave any of the following connections to ctivity, either full-time or part-time mership (LLP)	
11: Give Details About Your thin 4 years before you filed for bar A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managin An owner of at least 5% of the	r Business or Connections to Any nkruptcy, did you own a business or foreign a trade, profession, or other accompany (LLC) or limited liability parting executive of a corporation voting or equity securities of a corporation to Part 12.	r Business  ave any of the following connections to civity, either full-time or part-time mership (LLP)  ration	any business?
thin 4 years before you filed for bar A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managir An owner of at least 5% of the No. None of the above applies. Go Yes, Check all that apply above ar	Residence of Connections to Any intruptcy, did you own a business or foreign a trade, profession, or other accompany (LLC) or limited liability paring executive of a corporation voting or equity securities of a corporation to Part 12.	r Business  ave any of the following connections to ctivity, either full-time or part-time thership (LLP)  ration  siness.  Employer Identification	o any business?
thin 4 years before you filed for bar A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managir An owner of at least 5% of the	r Business or Connections to Any nkruptcy, did you own a business or foreign a trade, profession, or other accompany (LLC) or limited liability parting executive of a corporation voting or equity securities of a corporation to Part 12.	ration  siness.  Employer identification Do not include Social	o any business? on number Security number or ITIN
thin 4 years before you filed for bar A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managir An owner of at least 5% of the No. None of the above applies. Go Yes, Check all that apply above ar	r Business or Connections to Any nkruptcy, did you own a business or foreign a trade, profession, or other accompany (LLC) or limited liability parting executive of a corporation voting or equity securities of a corporation to Part 12.	ration  siness.  Employer identification to not include Social  EIN:	o any business?  on number  Security number or ITIN
thin 4 years before you filed for bar A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managin An owner of at least 5% of the No. None of the above applies. Go Yes. Check all that apply above ar Business Name	r Business or Connections to Any inkruptcy, did you own a business or for byed in a trade, profession, or other accompany (LLC) or limited liability parting executive of a corporation voting or equity securities of a corporation to Part 12.  Ind fill in the details below for each business of the business of the securities of the securities of the business of the securities of the	r Business  ave any of the following connections to etivity, either full-time or part-time enership (LLP)  ration  siness.  ss Employer Identification Do not include Social  EIN:  Dates business exists	o any business?  on number  Security number or ITIN
thin 4 years before you filed for bar A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managin An owner of at least 5% of the No. None of the above applies. Go Yes, Check all that apply above ar Business Name	Resiness or Connections to Any nkruptcy, did you own a business or it byed in a trade, profession, or other accompany (LLC) or limited liability paring executive of a corporation voting or equity securities of a corporation to Part 12.  Ind fill in the details below for each businesses the nature of the businesses.  Name of accountant or bookkeep	ration  siness.  Employer identification to not include Social  EIN:	on number Security number or ITIN
thin 4 years before you filed for bar A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managin An owner of at least 5% of the No. None of the above applies. Go Yes. Check all that apply above ar Business Name	Resiness or Connections to Any nkruptcy, did you own a business or it byed in a trade, profession, or other accompany (LLC) or limited liability paring executive of a corporation voting or equity securities of a corporation to Part 12.  Ind fill in the details below for each businesses the nature of the businesses.  Name of accountant or bookkeep	ration  siness.  Employer Identification  Dates business exists  From T  Employer Identification	on number Security number or ITIM
thin 4 years before you filed for bar A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managin An owner of at least 5% of the No. None of the above applies. Go Yes. Check all that apply above ar Business Name	r Business or Connections to Any inkruptcy, did you own a business or for a company (LLC) or limited liability parting executive of a corporation voting or equity securities of a corporation to Part 12.  Ind fill in the details below for each business or the business of a corporation to Part 12.  Name of accountant or bookkeep	ration  siness.  Employer Identification  Dates business exists  From T  Employer Identification	on number Security number or ITIM
thin 4 years before you filed for bar A sole proprietor or self-emplo A member of a limited liability A partner in a partnership An officer, director, or managin An owner of at least 5% of the No. None of the above applies. Go Yes. Check all that apply above ar Business Name  Number Street	r Business or Connections to Any inkruptcy, did you own a business or for a company (LLC) or limited liability parting executive of a corporation voting or equity securities of a corporation to Part 12.  Ind fill in the details below for each business or the business of a corporation to Part 12.  Name of accountant or bookkeep	ration  siness.  Employer Identification  Dates business exists  From T  Employer Identification  Do not include Social	on number Security number or ITIN

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1	Larry	Eugene	Eisenhart
Debili i	First Name	Middle Name	Last Name

	Describe the nature of the business	Employer Identification number  Do not include Social Security number or ITIN.
Business Name		EIN:
Number Street	Name of accountant or bookkeeper	Dates business existed
City State ZIP Code		From To
institutions, creditors, or other parties.	tcy, did you give a financial statement to anyone a	pout your business? Include all financial
Yes. Fill in the details below.	Date issued	
Name	MM / DD / YYYY	
Number Street		
City State ZIP Code		
Part 12: Sign Below		
answers are true and correct. I understand	t of Financial Affairs and any attachments, and I de d that making a false statement, concealing proper result in fines up to \$250,000, or imprisonment for	ty, or obtaining money or property by fraud
* Laur E Eiselle Signature of Debtor 1	Signature of Debtor 2	
Date 3-5-20(7) Did you attach additional pages to Your S	Date tatement of Financial Affairs for Individuals Filing	for Bankruptcy (Official Form 107)?
□ No □ Yes		
Did you pay or agree to pay someone who	is not an attorney to help you fill out bankruptcy	forms?
Yes. Name of person	Atta	ch the Bankruptcy Petition Preparer's Notice, laration, and Signature (Official Form 119).

Statement of Financial Affairs for Individuals Filing for Bankruptcy